Wisconsin Corporation Franchise or Income Tax Return

PAPER CLIP check or money order here

For 2012 or taxable year beginning $\frac{}{M}$ $\frac{}{M}$ $\frac{}{D}$ $\frac{}{D}$ $\frac{}{C}$ $\frac{}{C}$ $\frac{}{Y}$ $\frac{}{Y}$ and ending $\frac{}{M}$ $\frac{}{M}$ $\frac{}{D}$ $\frac{}{D}$ $\frac{}{C}$ $\frac{}{C}$ $\frac{}{Y}$ $\frac{}{Y}$

2012

		omplete form using BLACK INK. Due Date: 15th day of 3rd month following close of taxable year.								
		ELP FOR ALL INC								
BIND	Nu	mber and Street							Suite Num	har
DO NOT STAPLE OR BI		1 ANY ST								001
	-	NYTOWN		State WI	ZIP (+ 4 digit 20901	t suffix if known)		eral Employer L 0 0 0 0 0 0		
	D	Check ✓ if applicable and attach explanation:						iness Activity	(NAICS) Code	9
TS	1	Amended return 4	Sh	ort period - c	hange in accour	nting period		L3000 e of Incorpora	tion on	d V
OO NO	2	- 1			tock purchase o		W	Enter abl	breviation of ox, or if a	d Year 1 9 8 3 C C Y Y
-	3	Final return - corporation dissolved or withdrew						below.	ountry, enter	
	Che	ck ✓ if applicable and see instructions:								
	E	If you have an extension of time to file, enter extended due date	e	I M D D	CCY					
	F.	If no business was transacted in Wisconsin during the taxable y			200	A.A				
		your federal return.	year.	, attach a cor	npiete copy or					
	G _	, If you have related entity expenses and are required to file Sch	edul	e RT with thi	s return.					
	Н	, If you filed a federal consolidated return, enter Parent Compan	y's fe	ederal emplo	yer					
	ï	Internal Reviews Consider adjusted the	k	(2)						
	٠ ـــ	Internal Revenue Service adjustments became final during the Enter years adjusted ▶	year	Car 		1			ACT CONTRACTOR OF THE CONTRACT	2.0000000
		ENTER NECATIVE NUMBERS INC. THE			A CONTRACTOR OF THE PARTY OF TH		ENTF			E BLANK
	4	ENTER NEGATIVE NUMBERS LIKE THIS →		1990		0.000		NO CO	MMAS; N	
	7	Federal taxable income from Form 1120, line 28						1		89565.00
	∠	Additions (from Schedule V, line 13)						2		49294.00
	$2^{\frac{3}{2}}$	Add lines 1 and 2						3	1389	38859.00
y	4	Subtractions (from Schedule W, line 16).						4		5000.00
	<u>5</u>	Subtract line 4 from line 3. This is net income (loss) be	efore net b	usiness loss	offset	:	5	1389	33859.00
order here	<u>6</u>	Wisconsin net business loss carryforward (from Fo than line 5	rm .	4BL, Part	I, line 30(f))	but not more		6		•00
orde	Z	Subtract line 6 from line 5. This is Wisconsin net in						7	1389	33859.00
ney	8	Enter 7.9% (0.079) of Wisconsin net income on line						 R		
mo	9	Nonrefundable credits (from Schedule CR, line 51)		·····o io g.	ood tax			<u> </u>	10	15394 00
check or money	10	Relocated business credit. If qualified, subtract line	9 f	rom line 8						
b ch	44	If not qualified, enter 0. (See instructions)					10	0	***************************************	.00
R CLIP	11	Subtract lines 9 and 10 from line 8. If lines 9 and 10 This is net tax								30381.00
PAPER	<u>12</u>	Economic development surcharge (see instructions	s) .				12	2		9800.00
Ø,	<u>13</u>	Endangered resources donation (decreases refund								.00
	<u>14</u>	Veterans trust fund donation (decreases refund or i	ncr	eases am	ount owed)	VET	's 14	4		.00
	<u>15</u>	Add lines 11 through 14		#13#1.#13#1#2#7#2#			. 1	5	99	40181.00
	16	Estimated tax payments less refund from Form 446								
	-									
	10.05	singular with the state of the	٠.	. 17		•	00			

201	Porm 5			Page 2 of 2
18	Refundable credits (from Schedule CR, line 54)	1800		
19	Amended Return Only – amount previously paid	19	•	
<u>20</u>	Add lines 16 through 19			8000000,00
<u>21</u>	Amended Return Only – amount previously refund	led21	. 20	000000,00
22	Subtract line 21 from 20	.00	22	8000000.00
<u>23</u>	Interest, penalty, and late fee due (from Form 4U, If you annualized income of Form 4U, check (🗸) th	line 17 or 26)	***************************************	27996.00
24	Tax Due. If the total of lines 15 and 23 is greater th of lines 15 and 23	an line 22 subtract line 22 from the total		1968177.00
25	Overpayment. If line 22 is larger than the total of li lines 15 and 23 from line 22	nes 15 and 23 subtract the total of		
<u> 26</u>	Enter amount from line 25 you want credited on 20	13 estimated tax		.00
27	Subtract line 26 from line 25. This is your refund .			.00
28	Enter total company gross receipts from all activitie	s (see instructions)	28	397570000.00
<u>29</u>	Enter total company assets from federal Form 1120			
30	If the corporation is the sole owner of any limited lie Submit an additional schedule if necessary.	ability companies (LLCs), enter the names	and FEII	vs of those LLCs below.
Na	me of LLC		FEIN	

31	Did you include the income of the LLCs listed on lin	ne 30 on this return? Yes No		and the same of th
32	Did you file federal Schedule UTP - Uncertain Tax	Position Statement with the Internal Reve	nue Servi	ce?
33	Did you file federal Form 8886 - Reportable Trans	ection Disclosure Statement with the Inter	nal Paya	un Candana
	Yes No If yes, enclose federal Form 8886	with your Wisconsin tax return	nai Revei	iue Service?
Add	litional Information Required			
	Person to contact concerning this return: JOE SMITT	H Phone # 608-55	5-1212	Fax #:_608-555-1213
2		, none a		_ Fax #:
3				
	Did you purchase any taxable tangible personal propert of a state sales or use tax? Yes No If yes,	you owe vvisconsin use tax. See instructions	for how to	report use tax.
	er penalties of law, I declare that this return and all attachme	ants are true, correct, and complete to the best	of my know	ledge and belief.
Sig	nature of Officer Ti	tle	***************************************	Date
0		PRESIDENT		3-15-13
Pre		reparer's Federal Employer ID Number		Date
		. 1 0 0 0 0 0 1		3-10-13

You must file a copy of your federal return with Form 5, even if no Wisconsin activity.

If you are not filing your return electronically, make your check payable to and mail your return to:

Wisconsin Department of Revenue PO Box 8908 Madison, WI 53708-8908



Wisconsin Additions to Federal Income

Wisconsin Department of Revenue File with Wisconsin Form 4 or 5

2012

Read instructions before filling in this schedule

Corporation or Designated Agent Name	Federal Employer ID Nu	mber
HELP FOR ALL INC	110000001	
1 Interest income from state and municipal obligations		.00
2 State taxes accrued or paid		
3 Related entity expenses (from Schedule RT, Part I, Sch. 2K-1, and Sch. 3K-1)		
4 Domestic production activities deduction		
5 Expenses related to nontaxable income		
6 Percentage depletion	6	.00
7 Federal section 179 expense deduction in excess of Wisconsin deduction	n 7	•00
8 Federal depreciation/amortization in excess of Wisconsin depreciation/a		****
(attach schedule)		1800.00
9 Amount by which the federal basis of assets disposed of exceeds the Wi		
basis (attach schedule)		.00
10 Total additions for certain credits computed (see instructions)		
11 Special additions for insurance companies (from Schedule 4), line 4)	11	.00
12 Other (list):		
a		
b	.00	
C	.00	
d	.00	
е	.00	
f	.00	
g	.00	
h	.00	
Add lines 12a through 12h		.00
13 Total (enter on Form 4 or 5, page 1, line 2)		1049294 00



W

Wisconsin Subtractions From Federal Income

File with Wisconsin Form 4 or 5

2012

Wisconsin Department of Revenue

Corporation or Designated Agent Name

Read instructions before filling in this schedule

	ration of Designated Agent Name	Federal Employer ID Number	
HE	LP FOR ALL INC	110000001	
1	Wisconsin subtraction modification for dividends (from Sch. Y, line 4)	1	5000.00
	Related entity expenses eligible for subtraction (from Schedule RT, Part II,		
	Sch. 2K-1, and Sch. 3K-1)	2	.00
3	Income from related entities whose expenses were disallowed		
	(obtain Schedule RT-1 from related entity and submit with your return)	3	.00
4	Subpart F income		
5	Gross-up of foreign dividend income.		
6	Nontaxable income (attach schedule)		
Z	Foreign taxes (do not include deemed taxes)	7	.00
8	Cost depletion	8	.00
9	Wisconsin depreciation/amortization in excess of federal depreciation/amortization (attach schedule)	n 9	.00
<u>10</u>	Amount by which the Wisconsin basis of assets disposed of exceeds the federal basis (attach schedule)		.00
11	Federal work opportunity credit wages		.00
12	Federal research credit expenses		.00
	Other (list, but do not include any adjustment for nontaxable income from life insu		.00
	operations)	iance	
		.00	
		.00	
		.00	
	d	.00	
	•	.00	
	f	.00	
	9	.00	
	h	•00	
	Add lines 13a through 13h		.00
14	Nontaxable income from life insurance operations (from Schedule 4I, line 13)		
<u>15</u>			
	Enter number of members from combined group claiming job creation deduction		
16	Total (enter on Form 4 or 5, page 1, line 4)		5000.00
	ರಾಜ್ಯ ಪ್ರಕಾಣ ಪ್ರಜಾಣದ ಪ್ರದಾಣದ ಪ್ರದಾಣದ ಕ್ರಾಮಾ ಣ ಗ ಾಪ್ಕಾರ್ಯ ಕ್ರಾಮ್		

Wisconsin Subtraction Modification for Dividends

Wisconsin Department of Revenue

File with Wisconsin Form 4 or 5

Read instructions before filling in this schedule

Corporation or Designated Agent Name

HELP FOR ALL INC

Federal Employer ID Number

2012

110000001

***************************************	9		Divide	ends Received
	Name of Payer Corporation MONEY FOR ALL INC	Date Acquired by Payee		
1a	Name of Payee Corporation	0 6 3 0 1 9 9 4 M M D D C C Y Y		
	HELP FOR ALL INC	Payee's Ownership of Payer (check (v) one)		
***************************************	Name of Payer Corporation	> 50% but < or = 70%	1a	5000.00
955		Date Acquired by Payee	***************************************	• • • • • • • • • • • • • • • • • • • •
1b	Name of Payee Corporation	MMDDCCYY		
	7,000,000	Payee's Ownership of Payer (check (v) one)		
		1		
-	Nome of D O.	> 50% but < or = 70%	1b	•00
	Name of Payer Corporation	Date Acquired by Payee	10	*00
1c	Name of Payee Corporation	MMDDCCYY		
	realité of mayee Corporation	Payee's Ownership of Payer (check (v) one)		
	AN AN	> 70 %		
***************************************	-V	> 50% but < or = 70%	4.4	00
	Name of Payer Corporation	Date Acquired by Payee	1c	.00
1d	Name of Payee Corporation	MMDDCCYT		
	Name of Payde Corporation	Payee's Owner sup of Payer (check (%) one)		
	The second secon	□ 10%		
				2.2
	Name of Payer Corporation	Date (cqu) by Payre	1d	-00
		- Carlon		
4				
16	Name of Payee Corporation	MNDDCCYY		
		Payee's Ownership of Payer (check (√) one)		
		L_1 > 70%		
***************************************	Name of Payer Corporation	> 50% but < or = 70%	10	.00
	Name of Payer Corporation	Date Acquired by Payee		****
1f		MMDDCCYY		
	Name of Payee Corporation	Payee's Ownership of Payer (check (v) one)		
		> 50% but < or = 70%	1f	.00
1g	Add lines 1a through 1f		10	5000.00
			19	9000.00
1h	Total of line 1g from additional Schedules Y (see instruction	onel	46	00
	d Solidados i (see monden	0113)	1n	.00
2	Add lines 1g and 1h			E000 00
3570	Add lines 1g and 1h		2	5000.00
3	Enter foreign towns neid and the state of th			
J	Enter foreign taxes paid on dividends included on line 2.		3	.00
A	Cubin-11 - 25			000000000000000000000000000000000000000
4	Subtract line 3 from line 2. Enter this amount on Schedule	e W, line 1	4	5000.00
		racture execution is the recommendation of the state of t	***************************************	***************************************



SCHEDULE CR

Wisconsin Department of Revenue

Other Credits

Enclose with Wisconsin Form 1, 1NPR, 2, 4, 4T, or 5

2012

Name

HELP FOR ALL INC

Identifying Number

Par	Credite for individual of	1100	700001
*************	Corporations		
Α.	Nonrefundable Credits (claimed before alternative minimum tax)		
1	Postsecondary education credit (Schedule PF, line 7)	1	.00
2	The state of the s	2	00
3	and production credit (Schedule BC, line 6 or 6b for fiduciaries)	2	1000000
4	""""""""""""""""""""""""""""""""""""""	3	100,00001
	Corporations (see line 35 to claim this credit)		
	Fiduciaries (see instructions) – Beneficiaries portion		
5	Individuals (enter amount from Schedule 2K-1, 3K -1, or 5K-1) Veteran employment credit (Schedule 2K-1, 3K -1, or 5K-1)	4	.00
6	The state of the s	200	11755 00
7	"" Production company investment credit carrytonward (Schedule ED line 9)		00
	William Program Clean (Schedule CM, IIDE /	7	.00.
0	and and an	***************************************	
	 Individuals and Fiduciaries: Enter this amount on line 25 of Form 1, line 51 of Form 1NPR, line 8 of Form 2, or line 20 of Form 4T. 		
	Corporations: Enter this amount on line 33 of Part II		
B.	Nonrefundable Credits	8	1044365.00
9	Film production services credit carryforward (Schedule FP, line 7)	2 .	2.0
10	Manufacturer's sales tax credit carryforward (Schedule MS, line 3)	9	.00.
11	Manufacturing investment credit (Schedule MJ, line 6)	10	.00.
12	Manufacturing investment credit (Schedule MI, line 6)	11	.00.
13	Dairy and livestock farm investment credit (Schedule DI, line 9)	12	.00.
14	Ethanol and biodiesel fuel pump credit (Schedule EB, line 7) Development zones credit (Schedule DC, lines 7, 15, and 63)	13	.00
15	7 The state of the	4.4	00
16	The state of the s	4 27	00
17		4.0	00
18		4 79	00
19		4 4%	^^
	- The state of the	10	nn
20	and a design out of control yield ward	20	.00.
21	1.00 mics 5 miough 20 and enter on line 21	***************************************	
	Individuals and Fiduciaries: Enter this amount on line 31 of Form 1,		
	line 57 of Form 1NPR, line 13 of Form 2, or line 20 of Form 4T.		
C.	Corporations: Enter this amount on line 34 of Part II	21	.00,
23	Enterprise zone jobs credit (Schedule EC, line 3 or 3b for fiduciaries)	22	.00
24	Dairy manufacturing facility investment credit (Schedule DM, line 13 or 13b for fiduciaries)	23	.00
25	Dairy cooperatives credit (Schedule DM, line 14 or 14b for fiduciaries)	24	.00.
26	Meat processing facility investment credit (Schedule MP, line 7 or 7b for fiduciaries)	25	.00
	Film production services credit (Schedule FP, line 3 or 3b for fiduciaries)	26	.00.
27	Film production company investment credit (Schedule FP, line 6 or 6b for fiduciaries)	27	.00.
28	vydoby biomass harvesting and processing credit (Schedule WB, line 5 or 5b for fiduciaries)	28	.00.
29	Food processing plant and food warehouse investment credit (Schedule FW line 7 or		
20	7b for fiduciaries)	29	.00.
30	Beginning farmer and farm asset owner credit (Schedule FL, line 2, 6 or 6b for fiduciaries)	30	.00.
31	Jobs tax credit (Schedule JT, line 9)	31	.00.
32	Add lines 22 through 31 and enter on line 32.		
	 Individuals and Fiduciaries: Enter this amount on line 49 of Form 1, line 74 of Form 1NPR, line 24 of Form 2, or line 31 of Form 4T. 		
	Corporations: Enter this amount on line 52 of Part II	22	200
048i	Sinoi and amount on mis SZ UI Fall II	32	.00

Identifying number

		110000001	
Parl	II Credits for Corporations Only		
A. 1	Nonrefundable Credits		
33	Amount from Part I, line 8	33	1044365.00
34	Amount from Part I, line 21		
35	Health insurance risk-sharing plan assessments credit (Schedule HI, line 6)		
36	Research expense credit (Schedule R, line 30)		
37	Research expense credit for activities related to internal combustion engines (Schedule R-1, line 29)		
38	Research expense credit for activities related to certain energy efficient products (Schedule R-2, line 29)		
39	Development zones research credit carryforward		
40	Research facilities credit (Schedule R, line 34)		
41	Research facilities credit for activities related to internal combustion engines (Schedule R-1, line 33)		
42	Research facilities credit for activities related to certain energy efficient products (Schedule R-2, line 33)		
43	Super research and development credit (Schedule R, line 44)		
44	Community development finance credit		
45	Development zones jobs credit carryforward		
46	Development zones sales tax credit carryforward		
47	Development zones location credit carryforward		
48	Development zones day care credit carryforward		
49	Development zones environmental remediation credit carryforward		
50	Supplement to federal historic rehabilitation credit (Schedule HR, line 7)		
51	Add lines 33 through 50. Enter here and on line 22 of Form 4, line 11 of Form 4T, or line 9 of Form 5		
3. I	Refundable Credits		
52	Amount from Part I, line 32	52	.00
	Farmland preservation credit. a Schedule FC, line 18		
	b Schedule FC-A, line 13		
54	Add lines 52 and 53a and b. Enter here and on line 31 of Form 4, line 31 of Form 4 or line 18 of Form 5	T.	.00



Schedule VE

Veteran Employment Credit

Wisconsin Department of Revenue

Enclose with Form 1, 1NPR, 2, 3, 4, 4T, 5, or 5S

2012

Identifying Number HELP FOR ALL INC 110000001 1 Enter the number of qualified disabled veterans hired in the taxable year to work full-time at your business 40000.00 3 Enter the number of qualified disabled veterans hired in the taxable year to work part-time at your business 4 Enter the amount of credit for hiring a qualified disabled veteran to work part-time at your business in Wisconsin (from line D of worksheet on page 2) 4 4365.00 5 Add the amounts on lines 2 and 4 44365.00 6 If line 5 is greater than zero, enter your business activity (NAICS) code. If 313000 Z Enter the amount of veteran employment credit passed through from other entities..... 0.00 8 Add lines 5 and 7. This is your 2012 veteran employment credit 44365.00 8a Fiduciaries - Enter the amount of credit allocated to beneficiaries 8a .00



Name

HELP FOR ALL INC

Identifying Number

110000001

Worksheet to Compute Credit for Disabled Veterans Hired to Work Part-Time

***************************************		Veteran #1	Veteran #2	Veteran #3	Veteran #4	Veteran #5	Veteran #6
Α.	Number of hours disabled veteran worked for this employer during the taxable year (round to the nearest hour)	1040	1500	960	1040	Marie San	
B.	Divide the number on line A by 2080 (round decimal to four places)	0.5000	0.7212	0.4615	0.5000		
C.	Multiply \$2,000 by the decimal on line B (round to the nearest dollar). This is your credit for this part-time employee	1000	1422	923	1000		
D.	Total of amount from line C of all columnications of the columnication o	nns. This is y	our credit for	all part-time	5 * * × 5	4	4365 .00

WORKSHEET INSTRUCTIONS

Complete the above worksheet to determine your credit for hing a qualified disabled veteran to work part-time for your business in Wisconsin. If you hired more than one veteran to work part-time, you must complete a separate column of the worksheet for each veteran. If you hired more than six disabled veterans to work part-time, you may make additional copies of the worksheet as needed.

Fill in the amount from line D of the worksheet on line 4 of Schedule VE. If you have completed more than one worksheet, add the amounts from line D of all worksheets and fill in the total on line 4 of Schedule VE. All worksheets must be submitted with Schedule VE.

Schedule BC

Wisconsin Department of Revenue

Biodiesel Fuel Production Credit

Enclose with Form 1, 1NPR, 2, 3, 4, 4T, 5, or 5S

2012

Name

HELP FOR ALL INC

Identifying Number 11000001

Multiply the number on line 1 by .10 (10 cents)			***************************************	
3 Fill in the biodiesel fuel production credit passed through from other entities	1	the taxable year. If the number of gallons is less than 2,500,000, you do not	1	70000000
Add the amounts on lines 2 and 3	2	Multiply the number on line 1 by .10 (10 cents)	2	7000000
5 Maximum yearly credit	3	Fill in the biodiesel fuel production credit passed through from other entities	3	0
6 Fill in the smaller of line 4 or line 5. This is your 2012 biodiesel fuel production credit (see instructions)	4	Add the amounts on lines 2 and 3	4	7000000
6a Fiduciaries – Fill in the amount of credit allocated to beneficiaries	5	Maximum yearly credit	5	\$1,000,000
	6	Fill in the smaller of line 4 or line 5. This is your 2012 biodiesel fuel production credit (see instructions)	6	1000000
6b Fiduciaries – Subtract line 6a from line 6	6a	Fiduciaries - Fill in the amount of credit allocated to beneficiaries	6a	
	6b	Fiduciaries – Subtract line 6a from line 6	6b	

Instructions for 2012 Schedule BC

GENERAL INSTRUCTIONS

Purpose of Schedule BC

Use Schedule BC to claim the biodiesel fuel production credit. The credit is available for taxable years beginning after December 31, 2011, and before January 1, 2015.

Who is Eligible to Claim the Credit

Any individual, estate, trust, partnership, limited liability company (LLC), corporation, tax-option (S) corporation, insurance company, or tax-exempt organization may be eligible for the credit based on the number of gallons of biodiesel fuel produced in Wisconsin during the taxable year. Partnerships, LLCs treated as partnerships, and tax-option (S) corporations cannot claim the credit; instead the credit flows through to the partners, members, or shareholders based on their ownership interests.

Estates and trusts share the credit with their beneficiaries in proportion to the income allocable to each.

Definition

"Biodiesel fuel" means a fuel that is comprised of monoalkyl esters of long chain fatty acids derived from vegetable oils or animal fats. The fuel must (1) be registered as a biodiesel fuel by the manufacturer under 40 CFR Part 79, (2) be pure biodiesel fuel, is identified as such with the alphanumeric B100, and does not contain any petroleum product, any additive, or other foreign material, and (3) meet all of the applicable requirements of the American Society for Testing and Materials.

Schedule R

Wisconsin Research Credits

File with Wisconsin Form 4, 4T, or 5

2012

Wisconsin Department of Revenue

1, 1, 0, 0

Read instructions before filling in this schedule Name Federal Employer ID Number FOR ALL INC HELP 11-000000 1 Part I Credit for Increasing Research Expenses 1 51500 Enter Wisconsin research supplies expenses. 2 2 3400 Enter Wisconsin research computer rental expenses..... 3 3 Enter applicable percentage of Wisconsin contract research expenses..... 4 4 Enter expenses used to compute the federal orphan drug credit that qualify as Wisconsin research expenses..... 5 6 54900 7 7 Subtract line 7 from line 6. This is total Wisconsin research expenses. 54900 8 Section A Regular Credit. Complete this section only if you are claiming the regular credit - see instructions. (Skip this section and go to section B if you are electing the alternative incremental credit.) Check (✓) ___ if this is a one-time only change in election. Enter average annual Wisconsin gross receipts from the Worksheet on page 2, line 5..... 9 Enter Wisconsin fixed-base percentage, but not more than 16% (0.16) from the Worksheet on page 2, line 19 10 Subtract line 11 from line 8. If zero or less, enter zero (0). Multiply line 8 by 50% (0.50)..... 13 Enter the smaller of line 12 or line 13.... 14 Multiply line 14 by 5% (0.05). This is the regular Wisconsin credit for increasing research expenses . . . 15 Section B Alternative Incremental Credit. Complete this section only if you are claiming the alternative credit - see instructions. (Skip this section and go to line 29 if you completed section A.) Check (✓) ___ if this is a one-time only change in election. Enter average annual Wisconsin gross receipts from the Worksheet on page 2, line 5..... Multiply line 16 by 1% (0.01).
Subtract line 17 from line 8. If zero or less, enter zero (0). 16 2250000 17 22500 18 32400 Multiply line 16 by 1.5% (0.015) 19 33750 Subtract line 19 from line 8. If zero or less, enter zero (0)..... 20 150 21 11250 Multiply line 16 by 2% (0.02) 22 45000 23 9900 24 24 11250 25 298 26 360 27 27 37 Add lines 25, 26, and 27. This is the Wisconsin alternative incremental credit..... 28 029 Carryover of unused research expense credit..... 1029 Part II Credit for Research Facilities Total qualified research facility expenditures.... 31 32 33 34 Add lines 32 and 33. This is the available research facilities credit......

	art III Super Research and Developmen	4.6			
35		T Credit			
36	The second of the search expension of the search expen	ises		35	
37	zinci zo io vviscolisin qualmed research exper	ises		36	
38	- The Loos wisconsin qualified research expen	ises		27	
39	ridu mies 33 unough 37			30	***************************************
	Divide life 30 by 3		J. J. L. H. H. H. H. H.	30	
40	wulliply line 39 by 1.25			40	
41	Enter current year Wisconsin qualified research	n expenses		41	****
42	if life 41 is larger than line 40, subtract line 40 f	from line 41. This is the 201	2 Super Research	and	
	Development Credit			12	
43	Carryover of unused super research developme	ent credit	1771 - 01 - 170	43	
44	Add lines 42 and 43. This is the available super	research and development	credit	44	
Affichenses					
		WORKSHEET			
lve	rage Annual Wisconsin Gross Receipts	(a)	(b)	(c)	(d)
		2008	2009	2010	2011
1	Total gross receipts	1500000	2000000	2500000	3000000
2	Out-of-state receipts included on line 1				
4	Subtract line 2 from line 1	150000	2000000	2500000	3000000
5	Divide amount on line 4 by 4. This is average as		• • • • • • • • • • • • • • • • • •		9000000
	Add line 3, columns a through d. Divide amount on line 4 by 4. This is average and line 9 or line 16	nual wisconsin gross receip	ts to enter on Sche	dule R,	-
			A		2250000
Vis	consin Fixed-Base Percentage	(a) (b)	(c)	(d)	(e)
Vis 6	Consin Fixed-Base Percentage Wisconsin research wage expenses.	(é) (b)			
Vis 6 7	Wisconsin research wage expenses Wisconsin research supplies expenses	(a) (b)	(c)	(d)	(e)
Vis 6 7 8	Wisconsin research wage expenses Wisconsin research supplies expenses Wisconsin research computer rental	(a) (b)	(c)	(d)	(e)
Wis 6 7 8	Wisconsin research wage expenses Wisconsin research supplies expenses Wisconsin research computer rental expenses	(a) (b)	(c)	(d)	(e)
Vis 6 7 8	Wisconsin research wage expenses Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses	(a) (b)	(c)	(d)	(e)
Vis 6 7 8 9	Wisconsin research wage expenses Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal	(a) (b)	(c)	(d)	(e)
Vis 6 7 8 9	Wisconsin research wage expenses Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit.	(a) (b)	(c)	(d)	(e)
6 7 8 9 0 1	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development	(a) (b)	(c)	(d)	(e)
Vis 6 7 8 9 0 1 1 2	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development zones credit.	(a) (b)	(c)	(d)	(e)
Vis 6 7 8 9 0 1	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development zones credit. Subtract line 12 from line 11 Add line 13, columns a through e	(a) (b) 1985	(c) 1986	(d) 1987	(e)
Vis 6 7 8 9 0 1 2 3 4 4 5 5	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development zones credit. Subtract line 12 from line 11 Add line 13, columns a through e Total gross receipts	(a) (b)	(c) 1986	(d)	(e)
Vis 6 7 8 9 0 1 2 3 3 4 4 6 6	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development zones credit. Subtract line 12 from line 11 Add line 13, columns a through e Total gross receipts Out-of-state receipts on line 15.	(a) (b) 1985	(c) 1986	(d) 1987	(e)
Vis 6 7 8 9 0 1 2 3 4 7 5 6 7 5	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development zones credit. Subtract line 12 from line 11 Add line 13, columns a through e Total gross receipts Out-of-state receipts on line 15. Subtract line 16 from line 15	(a) (b) 1984 1985	(c) 1986	(d) 1987	(e)
Vis 6 7 8 9 0 1 2 3 4 5 6 6 7 8 8	Wisconsin research wage expenses. Wisconsin research supplies expenses Wisconsin research computer rental expenses. Wisconsin contract research expenses Qualifying expenses used in federal orphan drug credit. Add lines 6 through 10 Wages for Wisconsin development zones credit. Subtract line 12 from line 11 Add line 13, columns a through e Total gross receipts	(a) (b) 1985	(c) 1986	(d) 1987	(e)

Form /

of Revenue

Underpayment of Estimated Tax by Corporations

File with Wisconsin Form 4, 4T, 5, or 5S

Corporation or Designated Agent Name HELP FOR ALL INC

Federal Employer ID Number

11000001

2012

Computation of Underpayment and Interest Due on Underpayment 1 a Enter 2012 tax before the surcharge plus the economic development surcharge (see instructions) ... 9940180 0 c Subtract line 1b from line 1a. This is 2012 net tax and surcharge. If less than \$500, enter zero and go to Part II, if applicable 9940180 2 Enter 90% of line 1c 8946162 3 a Enter 2011 tax before the surcharge plus the economic development surcharge, if applicable (see instructions) 10971494 10970166 4 If 2012 net income is less than \$250,000 and 2011 return covered 12 months, enter smaller of line 2 or 3c; otherwise, enter line 2 8946162 Enter installment due dates (the 15th day of the 3rd, 3 - 156-15 9-15 12-15 6 Divide line 4 by 4 and enter the result in each column or, if you use the annualized income installment method for any period, first fill in Part III and enter the amounts from line 47 2236541 2236541 2236540 2236540 7 Estimated tax and surcharge paid..... 8000000 If line 7 is less than line 6, subtract line 7 from line 6. This is your underpayment 2236541 2236540 2236540 If line 7 is more than line 6, subtract line 6 from line 7. This is your overpayment 5763454 5763459 3526918 1290378 12 Subtract the total of lines 10 and 11 from line 8. This is 946162 13 Number of days from the due date of the installment to the date carryback on line 10 was paid... 14 Number of days from the due date of the installment to the date balance due on return was paid or unextended due 90 15 Interest: 12% per year on amount on line 10 for the number of days on line 13 16 Interest: 12% per year on amount on line 12 for the number of days on line 14 27996 17 Add all of the amounts on lines 15 and 16 and enter the total. If your return is filed after the unextended due date and 27996 Part II Computation of Total Amount Due Complete this part only if your return is not filed by the unextended due date and (a) Interest at (b) Interest at shows a tax due. (c) Total 18% per year 12% per year 18 If return filed late without an extension, enter net tax (including surcharge) ... 19 If return filed with extended due date and shows -(90%)(10%)a Net tax (including surcharge) of \$500 or more, enter portion of net tax indicated . . b Net tax (including surcharge) of less than \$500, enter net tax..... Subtract line 20 from line 18 or 19a or 19b. This is amount due 15th day of 3rd month after end of taxable year 22 Interest on underpayment from Part I, line 17..... Harman Comme 23 Add lines 21 and 22...... (18% per year) (12% per year) 24 Interest on amounts on line 23 to (date return filed) 25 If your return is filed late without an extension or after the extended due date a Enter penalty of 5% of net tax due on your return for each month or fraction thereof that your return is late, but not more than 25% b Enter a \$150 late fee * Note: See the instructions for line 24.

Fill	Annualized Income Installment Method Workship In this workship only if computing a service department.						
THE TOUR	n this worksheet only if computing required installments using the annualized me installment method. Complete one column through line 47 before completing part column.						
ing	mers see instructions to figure lines 27 and 29.	(a) First 2 months	(b) First 5 months	(c) First 8 months	(d) First 11 months		
27	Enter Wisconsin net income for each period (see instructions)						
28	Annualization factor	6	2.4	1.5	1.091		
29	Multiply line 27 by line 28			1,0	1.031		
30	Adjustments (NBLs, etc. – see instructions)						
31	Combine lines 29 and 30. This is annualized income.						
32	Multiply line 31 by 7.9% (0.079). This is annualized gross tax						
33	Enter your nonrefundable credits			***************************************			
34	Subtract line 33 from line 32. If zero or less, enter zero						
35	Enter economic development surcharge (based on amount in this column)		Ber - 6-000				
36	Add lines 34 and 35						
37	Enter your refundable credits (excluding estimated tax and surcharge paid)				<u> </u>		
38	Subtract line 37 from line 36. If zero or less, enter zero. This is annualized net tax.						
39	Applicable percentage	22.5%	AFR				
40	Multiply line 38 by line 39	22.376	45%	67.5%	90%		
41	Enter the combined amounts of line 47 from all preceding columns	A Comment					
42	Subtract line 41 from line 40. If zero or less, enter zero	PERSONAL SECTION OF THE PERSON					
43	Divide Part 1, line 4, by 4 and enter the result in each column		This do no recommendation of the second				
44	Enter the amount from line 46 for the preceding column						
45	Add lines 43 and 44 and enter the total						
46	If line 45 is more than line 42, subtract line 42 from line 45. Otherwise, enter zero.						
47	Enter the smaller of line 42 or 45 here and on Part 1, line 6						